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☒ Number of Pages (including this page)

Date: April 13, 2006  
To: Smith, Sheila B.- Art Unit 2681  
Location: United States Patent and Trademark Office  
Fax No.: 571-273-8300 Centralized Facsimile Number  
From: Jeffrey K. Jacobs  
Serial No.:  
Subject: 10/647,424

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REG. NO. 44,798  
Docket No.:  
CE10278R

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Enclosed herewith, please find **NOTICE OF APPEAL** for filing in the below-identified application.

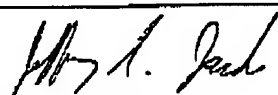
EXAMINER:	Smith, Sheila B.
ART UNIT:	2681
APPLICATION SERIAL NO.:	10/647,424
FILE DATE:	August 25, 2003
INVENTOR:	John M. Harris

<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/647,424	<b>RECEIVED CENTRAL FAX CENTER</b> <b>APR 13 2006</b>
	Filing Date	August 25, 2003	
	First Named Inventor	John M. Harris	
	Group Art Unit	2681	
	Examiner Name	Smith, Sheila B.	
Total Number of Pages in this Submission	Attorney Docket Number	CE10278R	

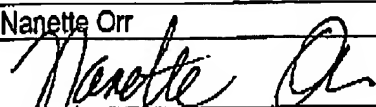
  

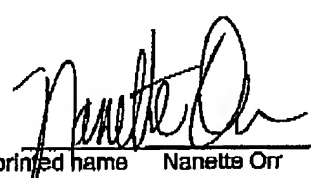
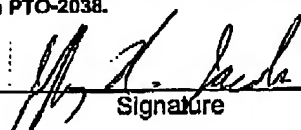
ENCLOSURES		(check all that apply)
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Jeffrey K. Jacobs	Registration No.	44,798
Signature			
Date	April 13, 2006		

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I hereby certify that this correspondence is being facsimile transmitted to facsimile number <u>571-273-8300</u> or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:	
Typed or printed name	Nanette Orr
Signature	
Date	April 13, 2006

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number <b>CE10278R</b>												
I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450" on: April 13, 2006  Signature    Typed or printed name <u>Nanette Orr</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">In re Application of</td> <td>John M. Harris</td> </tr> <tr> <td>Application Number</td> <td>10/647,424</td> </tr> <tr> <td>Filed</td> <td>August 25, 2003</td> </tr> <tr> <td>For</td> <td>SYSTEM AND METHOD FOR CONTROLLING THE OPERATING CHARACTERISTICS OF A BUFFER</td> </tr> <tr> <td>Art Group</td> <td>2681</td> </tr> <tr> <td>Examiner</td> <td>Smith, Sheila B.</td> </tr> </table>		In re Application of	John M. Harris	Application Number	10/647,424	Filed	August 25, 2003	For	SYSTEM AND METHOD FOR CONTROLLING THE OPERATING CHARACTERISTICS OF A BUFFER	Art Group	2681	Examiner	Smith, Sheila B.
In re Application of	John M. Harris													
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For	SYSTEM AND METHOD FOR CONTROLLING THE OPERATING CHARACTERISTICS OF A BUFFER													
Art Group	2681													
Examiner	Smith, Sheila B.													
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) <span style="float: right;">\$ <u>500.00</u></span>														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <span style="float: right;">\$ _____</span>														
<input type="checkbox"/> A check in the amount of the fee is enclosed.														
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.														
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a Fee Transmittal in duplicate.														
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any over payment to Deposit Account Number <b>502117</b> .														
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.														
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>														
I am the														
<input type="checkbox"/> applicant/inventor.														
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)														
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>44,798</u>														
<input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____														
 _____ Signature		<u>847-576-552</u> Telephone number												
<u>Jeffrey K. Jacobs</u> Typed or printed name		<u>April 13, 2006</u> Date												
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.														
<input checked="" type="checkbox"/> * Total of 1 forms are submitted.														

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